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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/654,766
		Filing Date	September 4, 2003
		First Named Inventor	Black, David
		Art Unit	3629
		Examiner Name	Not yet assigned
Total Number of Pages in This Submission	7	Attorney Docket Number	2967/1

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Return Receipt Post Card
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

Please charge any applicable fees to Deposit Acct.No. 01-0265

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Brandon C. Trego, Reg. No. 53,702
Signature	
Date	January 14, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Karen Walker		
Signature		Date	1/14/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/654,766 Confirmation No. 6919
Applicant : Black, David
Filed: : September 4, 2003
Title : Optical Disk Trading Card
TC/A.U. : 3629
Examiner : Not Yet Assigned

Docket No. : 2967/1
Customer No. : 23638

Attn: Group Art Unit 3629
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

In compliance with 37 C.F.R. Section 1.56 and pursuant to 37 C.F.R. Section 1.98(d), Applicant hereby submits the references as listed on the enclosed PTO form 1449 for consideration by the Examiner in the prosecution of the subject application:

Pursuant to M.P.E.P. §609, the Applicant requests that the references cited on the enclosed PTO Form 1449 be listed on the cover sheet of any patent issuing on the present application.

If there are any fees due in connection with this matter, please charge Applicant's Deposit Account No. 01-0265. A duplicate of this paper is being submitted for this purpose.

Respectfully submitted,

Brandon C. Trego

Brandon C. Trego
Attorney for Applicant
Registration No. 53,702

Brandon C. Trego
ADAMS EVANS P.A.
2180 Two Wachovia Center
Charlotte, North Carolina 28282
Tel. 704-375-9249
Fax: 704-375-0729
e-mail: bct@adamspat.com
File No. 2967/1



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Approved for use through 07/31/2006. OMB 0651-0031
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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

<p>Substitute for form 1449/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p><i>(Use as many sheets as necessary)</i></p>				Complete if Known	
				Application Number	10/654,766
				Filing Date	September 4, 2003
				First Named Inventor	Black, David
				Art Unit	3629
				Examiner Name	Not yet assigned
Sheet	1	of	1	Attorney Docket Number	2967/1

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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